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7590

12/01/2004

The Firm of Hueschen and Sage
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Linda Wooden

(Depositor's name)

(Signature)

February 24, 2005

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/689,394

10/20/2003

Sylvain Rault

SERVIER 412

2877

TITLE OF INVENTION: IMIDAZOLINE COMPOUNDS

03/01/2005 DENMANU2 00000051 083220 10689394

01 FC:1501

1400.00 OP

02 FC:1504

285.00 OP

03 FC:8001

15.00 DA

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional

NO

\$1370

\$300

\$1670

03/01/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
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SHAMEEM, GOLAM M

1626

514-397000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

LES LABORATOIRES SERVIER

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

COURBEVOIE CEDEX, FRANCE

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☒ Advance Order - # of Copies 5

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☒ A check in the amount of the fee(s) is enclosed. Check #73293 for \$1,685.00☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 08-3220 (enclose an extra copy of this form).

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☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

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Authorized Signature

Date

25 FEBRUARY 2005

Typed or printed name

G. PATRICK SAGE

Registration No.

37,710

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